

PART B - FEE(S) TRANSMITTAL

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Heidi McCarty (Depositor's name)
 (Signature)
 24 November 2008 (Date)

52835 7590 09/18/2008

HAMRE, SCHUMANN, MUELLER & LARSON, P.C.
 P.O. BOX 2902
 MINNEAPOLIS, MN 55402-0902

11/25/2008 HUUONG2 00000064 503478 10519892

01 FC:1501
 02 FC:1504

1510.00 DA
 300.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/519,892	12/29/2004	Tetsuya Sakata	10921.267USWO	9700
TITLE OF INVENTION: UNIT FOR PIERCING, AND PIERCING DEVICE				

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440 1510	\$300	\$0	\$1940 1810	12/18/2008
EXAMINER	ART UNIT	CLASS-SUBCLASS				
NAQI, SHARICK	3736	600-583000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Hamre, Schumann, Mueller & Larson, P.C.
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ARKRAY, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

KYOTO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☐ Corporation or other private group entity ☐ Government

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☒ Issue Fee
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☐ A check is enclosed.
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☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-3478 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature _____

Typed or printed name James A. Larson

Date 24 November 2008

Registration No. 40,443

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FAX TRANSMISSION 24 November 2008

TO: Mail Stop: ISSUE FEE
Examiner: NAQI, S.
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

FROM: James A. Larson

OUR REF: 10921.267USWO

TELEPHONE: (612) 455.3800

Total pages, including cover letter: 2


PTO FAX NUMBER: 571.273.2885

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Title of Document: Form PTOL-85 (1 page)

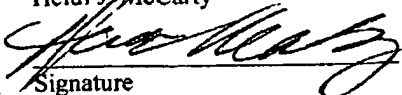
Applicant: SAKATA et al.
Serial No.: 10/519892
App. Filed: December 29, 2004
Group Art No.: 3736

Please charge Deposit Account No. 50-3478 in the amount of \$1510.00 for Issue Fee and \$300.00 for Publication Fee. Please charge any additional fees or credit overpayment to Deposit Account No. 50-3478. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

By: 
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Reg. No.: 40,443

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

Heidi J. McCarty


Signature

24 November 2008
Date

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